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CONFIRMATION NO. 5686

<b>SERIAL NUMBER</b> 08/869,386	<b>FILING OR 371(c) DATE</b> 06/05/1997 <b>RULE</b> 1.60	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1648	<b>ATTORNEY DOCKET NO.</b> UTSC:538
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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a DIV of 07/945,865 09/16/1992 ABN

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED** \*\* SMALL ENTITY \*\*  
 \*\* 08/27/1997

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> TX	<b>SHEETS DRAWING</b>	<b>TOTAL CLAIMS</b> 20	<b>INDEPENDENT CLAIMS</b> 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>C. S. 7/24/07 C. S.</i> Examiner's Signature Initials				

**ADDRESS**  
 32425

**TITLE**

COMPOSITIONS AND METHODS FOR ELICITING IMMUNE OR ANTI-INFECTIVE RESPONSES

<b>FILING FEE RECEIVED</b> 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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